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| APPLICATION NO.          | FILING DATE                       | FIRST NAMED INVENTOR             | ATTORNEY DOCKET NO.  | OOCKET NO. CONFIRMATION NO. |  |
|--------------------------|-----------------------------------|----------------------------------|----------------------|-----------------------------|--|
| 10/613,369               | 07/03/2003                        | Karim-Thomas Taghizadeh-Kaschani | WMP-IFT-962          | 4841                        |  |
| 24131<br>Lerner Gre      | 7590 01/10/200<br>ENBERG STEMER L | •                                | EXAMINER             |                             |  |
| P O BOX 2480             |                                   |                                  | WILLIAMS, LAWRENCE B |                             |  |
| HOLLYWOOD, FL 33022-2480 |                                   |                                  | ART UNIT             | PAPER NUMBER                |  |
|                          |                                   | •                                | 2611                 |                             |  |
|                          |                                   |                                  |                      |                             |  |
| SHORTENED STATUTOR       | Y PERIOD OF RESPONSE              | MAIL DATE                        | DELIVERY MODE        |                             |  |
| 3 MO                     | NTHS                              | 01/10/2007                       | PAPER                |                             |  |

Please find below and/or attached an Office communication concerning this application or proceeding.

If NO period for reply is specified above, the maximum statutory period will apply and will expire 6 MONTHS from the mailing date of this communication.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                 |                                                                                                   | Application N                                                                              | о.                                                                                      | Applicant(s)                                                           |        |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------|--|--|--|
| Office Action Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                 | 10/613,369                                                                                        |                                                                                            | TAGHIZADEH-KASCHANI, KARIM-<br>THOMAS                                                   |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                 | Examiner                                                                                          |                                                                                            | Art Unit                                                                                |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                 |                                                                                                   | Lawrence B. V                                                                              |                                                                                         | 2611                                                                   |        |  |  |  |
| The MA<br>Period for Reply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | AILING DATE of this commu                                                                                                                                                                                                                                                                       | nication appe                                                                                     | ears on the co                                                                             | ver sheet with the c                                                                    | orrespondence ad                                                       | dress  |  |  |  |
| WHICHEVER - Extensions of time after SIX (6) MON - If NO period for re - Failure to reply wi Any reply received                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ED STATUTORY PERIOD IN IS LONGER, FROM THE IN IS LONGER, FROM THE IN IS LONGER, FROM THE IN ITHS from the mailing date of this come ply is specified above, the maximum so thin the set or extended period for reply d by the Office later than three months m adjustment. See 37 CFR 1.704(b). | MAILING DA<br>s of 37 CFR 1.136<br>munication.<br>statutory period will<br>y will, by statute, of | ATE OF THIS (<br>6(a). In no event, he<br>fill apply and will exp<br>cause the application | COMMUNICATION owever, may a reply be tim ire SIX (6) MONTHS from in to become ABANDONEI | ).<br>ely filed<br>the mailing date of this co<br>O (35 U.S.C. § 133). |        |  |  |  |
| Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 1)⊠ Respons                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | sive to communication(s) fil                                                                                                                                                                                                                                                                    | ed on 03 Jul                                                                                      | lv 2003.                                                                                   |                                                                                         |                                                                        |        |  |  |  |
| · = ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | This action is <b>FINAL</b> . 2b)⊠ This action is non-final.                                                                                                                                                                                                                                    |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| <i>'</i> =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Since this application is in condition for allowance except for formal matters, prosecution as to the merits is                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | closed in accordance with the practice under <i>Ex parte Quayle</i> , 1935 C.D. 11, 453 O.G. 213.                                                                                                                                                                                               |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| Disposition of Cla                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | aims                                                                                                                                                                                                                                                                                            |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 4)⊠ Claim(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4)⊠ Claim(s) <u>1-24</u> is/are pending in the application.                                                                                                                                                                                                                                     |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 4a) Of the above claim(s) is/are withdrawn from consideration.                                                                                                                                                                                                                                  |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 5) Claim(s) is/are allowed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1-24 is/are rejected.                                                                                                                                                                                                                                                                           |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | is/are objected to.                                                                                                                                                                                                                                                                             |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | are subject to restri                                                                                                                                                                                                                                                                           | ction and/or                                                                                      | election requi                                                                             | rement.                                                                                 |                                                                        |        |  |  |  |
| Application Pape                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | •                                                                                                                                                                                                                                                                                               |                                                                                                   | •                                                                                          |                                                                                         |                                                                        |        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | cification is objected to by the                                                                                                                                                                                                                                                                | ao Evaminar                                                                                       |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | •                                                                                                                                                                                                                                                                                               |                                                                                                   |                                                                                            | h\□ chiected to h                                                                       | v the Evaminer                                                         |        |  |  |  |
| 10) ☐ The drawing(s) filed on <u>03 July 2003</u> is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).  11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ·                                                                                                                                                                                                                                                                                               | to by the Exe                                                                                     | ammer. Note t                                                                              | ne attached Office                                                                      | Action of form 1                                                       | 0-102. |  |  |  |
| Priority under 35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | U.S.C. § 119                                                                                                                                                                                                                                                                                    |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| <ul> <li>12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).</li> <li>a) All b) Some * c) None of:</li> <li>1. Certified copies of the priority documents have been received.</li> <li>2. Certified copies of the priority documents have been received in Application No.</li> <li>3. Copies of the certified copies of the priority documents have been received in this National Stage</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | application from the International Bureau (PCT Rule 17.2(a)).                                                                                                                                                                                                                                   |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| * See the attached detailed Office action for a list of the certified copies not received.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| Attachment(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 1) Notice of References Cited (PTO-892)  4) Interview Summary (PTO-413)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 2) Notice of Draftsperson's Patent Drawing Review (PTO-948) Paper No(s)/Mail Date.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |
| 3) Information Disclosure Statement(s) (PTO/SB/08)  Paper No(s)/Mail Date  5) Into Notice of the control |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         | atent Application                                                      |        |  |  |  |
| aper 140(s/rivial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                 |                                                                                                   |                                                                                            |                                                                                         |                                                                        |        |  |  |  |

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### **DETAILED ACTION**

## Specification

- 1. The disclosure is objected to because of the following informalities:
- a.) Page 19, line 4 recites "the transmission apparatus K1". The examiner assumes applicant meant to make reference to "the transmission apparatus 11" in Fig. 1.
- b.) Page 20, line 9 recites, "this signal pulse RS". The examiner assumes applicant meant to make reference to "the signal pulse PS" in Fig. 2.
- c.) Page 22, beginning with line 10 makes reference to Fig. 3 and a first and second pulse sequence PS1, PS2, respectively, while Fig. 3 displays these pulses labeled as PF1, PF2, respectively.
- d.) On page 37, line 1, the examiner suggest applicant replace "Schmitt trigger SD4" with Schmitt trigger ST4.
  - e.) The examiner suggest applicant resubmit page 42 of the specification.

    Appropriate correction is required.
- 2. The specification has not been checked to the extent necessary to determine the presence of all possible minor errors. Applicant's cooperation is requested in correcting any errors of which applicant may become aware in the specification.

## Claim Rejections - 35 USC § 112

3. The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter, which the applicant regards as his invention.

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4. Claims 1-24 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for

failing to particularly point out and distinctly claim the subject matter which applicant regards as

the invention.

5. Where applicant acts as his or her own lexicographer to specifically define a term of a

claim contrary to its ordinary meaning, the written description must clearly redefine the claim

term and set forth the uncommon definition so as to put one reasonably skilled in the art on

notice that the applicant intended to so redefine that claim term. Process Control Corp. v.

HydReclaim Corp., 190 F.3d 1350, 1357, 52 USPQ2d 1029, 1033 (Fed. Cir. 1999). The term

"stipulated" in claims 1, 2, 14, 20, 21 is used by the claim to mean "predetermined", while the

accepted meaning is "1. to make or express demand; 2. to require as an essential condition in

making an agreement; 3. to promise, in making an agreement." The term is indefinite because

the specification does not clearly redefine the term.

Claims 23-13, 15-19, 22-24 are rejected based upon their dependency upon claims 1, and

14.

6. Claim 2 is rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing

to particularly point out and distinctly claim the subject matter which applicant regards as the

invention.

Claim 2 recites the limitation:

if an interference signal is detected on one of the first and second channels,

retransmitting the first pulse sequence; and

if an interference signal is detected on one of the second and first channels,

retransmitting the second pulse sequence. As presented, the limitation is vague as it is unclear

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when the first or second pulse sequence will be transmitted since they are both transmitted if an interference signal is detected on either of the two channels. The examiner suggests applicant rewrite the claim to particularly point out and distinctly claim the invention.

7. Claims 20-21 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

Claim 20 cites a preamble, which includes the phrase "wherein at least one of the following is true". This phrase renders the claim indefinite as it fails to state exactly what applicant is attempting to claim as the subject matter. The examiner suggests applicant rewrite the claim to particularly point out and distinctly claim the invention.

Claim 21 cites a preamble, which includes the phrase "wherein at least one of the following is true". This phrase renders the claim indefinite as it fails to state exactly what applicant is attempting to claim as the subject matter. The examiner suggests applicant rewrite the claim to particularly point out and distinctly claim the invention.

### Conclusion

- 8. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.
- a.) Vlasov et al. discloses in US 2005/0163247 A1 Isolation Barrier For Interfacing A Line Side Device To A System Side Device.

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b.) Feldtkeller discloses in US 2006/0269002 A1 Method For Data Transmission Via A

Data Transmission Path With Inductive Transformers, And A Data Transmission Apparatus.

- c.) Gable et al. discloses in US 4,234,952 Conflict Resolution By Retransmission Delay On Shared Communication Medium.
- d.) Metcalfe et al. discloses in US 4063,220 Multipoint Data Communication System With Collision Detection.
- e.) Bonvallet et al. discloses in US Patent 5,450,611 Fast Channel Access Protocol For A Two-Way Communication System.
- 9. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Lawrence B Williams whose telephone number is 571-272-3037. The examiner can normally be reached on Monday-Friday (8:00-6:00).

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Ghayour Mohammad can be reached on 571-272-3021. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

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Lawrence B. Williams

January 8, 2007